## BEST AVAILABLE COPY

	M	ULTIP	LE DEF	ENDE	NT CL	IM	·	PDIAL 1	•				LE (	<b>JUP</b>		
	MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								SERIAL NO.  10/579770  APPLICANT(S)  PILING DATE							
					10-0/5		······································		NT(S)	V.						
1	AST	all ED	AF	rer	· AE	ron (	CLAIMS						,			
	AS FILED		I"AMENDMENT		AFTER 2 MAMENDMENT				ACE	TY mm	AP	The second		,		
-	IND. DEP.		IND. DEP.		IND. DEP.				AS F	ILED. A		TER	AF	AFTER		
2				-		DIM.	-	F	IND.	DEP.	IND.	DEP.		NOMENT		
3.		2					•	<u>51</u>				DUL	IND.	DEP.		
5		2		-				53								
6		8		1,			-	54 55								
7		0		-				56				****	•			
8		8						57	(I							
10		0		1				58 59								
$\frac{11}{12}$		0		7/-				50								
13			-47					1 2				-				
14 15	1		11				-	3								
16								4 -								
17		या		14-1-			6									
18		41					6									
20				+			69									
21 22		SI.		1			70									
23		<del>-</del>		7			$\frac{71}{72}$									
24. 25							. 73									
26							74 75									
27 28							76									
29							77						-			
30							79									
32			-				80 81									
33							82			-						
35				2		-	<u>83</u> 84									
36							85	-								
37							86		1			_				
39.							87 88									
10					_		89	1								
2			-				90 91	-						_  .		
4						]	92	1						-		
5							93									
6			-				94			1			-			
7 8						_	. 96			-		-				
9						-	9 <u>.7</u> 98					-		-		
0		-				]	99			1				-		
IND.	1	K	4			-	100			1	-					
DEP.	4	一片	₩   4			•	TOTAL IND.			1	1	-	1	4		
AL Ms		200			FIGURE ST		TOTAL DEP		4		<b>₹</b> 8		4			
1360 (REV. 11			Rehative	2			TOTAL CLAIMS							e e		
(ur.1)	1744}		•			•					COMMERCE	<b>8.8</b>	ANNE	31		